

# CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

## For State and Local Candidates For Single-Candidate Committees

|   |  |   |
|---|--|---|
| 1. DATE OF REPORT<br><b>01-22-2018</b>  | 2.a. NAME OF CANDIDATE OR COMMITTEE<br><b>Billy Geminden</b> |   |
| 2.b. IF COMMITTEE, NAME OF CANDIDATE  |  | 3. ELECTION DATE<br><b>08-07-2014</b>                                       |
| 4.a. CAMPAIGN ADDRESS AND PHONE<br>Street or Rural Route      City      State      Zip Code      Phone<br><b>1419 Hwy 259      PORTLAND      TN      37146      615-354-4298</b>  |  |   |
| 4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.)<br>Street or Rural Route      City      State      Zip Code      Phone   |  |   |
| 5. OFFICE SOUGHT (include district number, if applicable)<br><b>County Commissioner District 2</b>  |  | 6. NAME OF POLITICAL TREASURER (may be candidate)<br><b>DENISE GEMINDEN</b> |
| 7. CATEGORY OR REPORT (Check one)<br><input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input checked="" type="checkbox"/> YEAR-END SUPPLEMENTAL   |  |   |
| 8.a. BEGINNING DATE OF REPORTING PERIOD<br><b>July 1, 2017</b>  |  | 8.b. ENDING DATE OF REPORTING PERIOD<br><b>January 15, 2018</b>             |
| 9. (Check one)<br>a. <input checked="" type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)<br>b. <input type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.  |  |   |
| 10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.<br><br><div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u><b>Billy Geminden</b></u><br/>signature of candidate         </div> <div style="text-align: center;"> <u><b>1/22/18</b></u><br/>date         </div> <div style="text-align: center;"> <u><b>Denise Geminden</b></u><br/>signature of political treasurer         </div> <div style="text-align: center;"> <u><b>1/22/18</b></u><br/>date         </div> </div> |  |   |
| 11. WITNESS SIGNATURE<br><br><div style="display: flex; justify-content: space-between;"> <div style="text-align: center;"> <u><b>Amy Geminden</b></u><br/>signature of witness         </div> <div style="text-align: center;"> <u><b>1/22/18</b></u><br/>date         </div> <div style="text-align: center;"> <u><b>Amy Geminden</b></u><br/>signature of witness         </div> <div style="text-align: center;"> <u><b>1/22/18</b></u><br/>date         </div> </div>  |  |   |
| 12. SUMMARY   |  |   |
| a. BALANCE ON HAND LAST REPORT ..... <b>FILED</b> ..... \$ <u><b>344.92</b></u>   |  |   |
| b. TOTAL RECEIPTS THIS PERIOD ..... A.M.      P.M. ..... \$ _____   |  |   |
| c. TOTAL DISBURSEMENTS THIS PERIOD ..... <b>JAN 22 2018</b> ..... \$ <u><b>5.00</b></u> <i>Bank Charge</i>  |  |   |
| d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.) ..... \$ <u><b>339.92</b></u>   |  |   |
| <b>ELECTION COMMISSION</b>  |  |   |
| e. TOTAL LOANS OUTSTANDING ..... \$ <u><b>0</b></u>   |  |   |
| f. TOTAL OBLIGATIONS OUTSTANDING ..... \$ <u><b>0</b></u>   |  |   |

